

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or a joint inventor (if plural names are listed below) of the invention entitled

**COMPOSITIONS AND METHODS FOR THE PREVENTION OR
TREATMENT OF CANCER AND BONE LOSS ASSOCIATED WITH
CANCER**

which is described and claimed in the specification which:

- ☐ is attached hereto.
- ☒ was filed on September 3, 1999
as Application Serial No. 09/389,545
and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

Power of Attorney: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Ron K. Levy, Registration No.: 31,539, Steven M. Odre, Registration No.: 29,094, and Robert B. Winter, Registration No.: 34,458, said attorney(s)/agent(s) to have in addition full power of revocation, including the power to revoke any power herein granted.

Please send all future correspondence to:

U.S. Patent Operations/RBW
Dept. 430, M/S 27-4-A
AMGEN INC.
One Amgen Center Drive
Thousand Oaks, California 91320-1799

Direct Telephone Calls To:

Robert B. Winter
Attorney/Agent for Applicant(s)
Registration No.: 34,458
Phone: (805) 447- 2425

CERTIFICATE OF MAILING


I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231, on the date appearing below.

October 12, 1999
Date

Walter S. Winter
Signature

DECLARATION AND POWER OF ATTORNEY (cont'd)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Inventor: COLIN R. DUNSTANInventor's Signature: Date: 9/29/99

Residence and

Post Office Address: 887 Tupelo Wood Court, Thousand Oaks, CA 91320 USA

(Address, City, State, Zip Code, Country)

Citizenship: Australia